Rhode Island Department of Health Division of Laboratories

Forensic Sciences Laboratory Service Manual June 2006

"Science in the Service of Justice"



RHODE ISLAND DEPARTMENT OF HEALTH FORENSIC SCIENCES LABORATORY

SERVICE MANUAL

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Introduction

The Forensic Sciences Laboratory (FSL) was established in 1938 as part of the Rhode Island Department of Health (RI DOH) Division of Laboratories under state statute §23-1-8. The mission of FSL is to examine evidence and provide expert scientific opinion in legal and criminal cases for local law enforcement agencies, the RI Attorney General and the Office of the State Medical Examiner. FSL has implemented a quality management system to promote objective and impartial forensic testing.

This booklet is designed to make the process of submitting evidence to FSL easier and more efficient. If further information or guidance is needed, please contact the laboratory at the telephone numbers listed below.

Hours of Operation

Laboratory hours are 8:30 a.m. to 4:30 p.m., Monday through Friday. To arrange for special assistance during non-business hours, please contact the laboratory.

Laboratory Location

The Forensic Sciences Laboratory (FSL) is located in the Chapin Laboratory Building at 50 Orms Street in Providence, Rhode Island. The Chapin Building houses the Department of Health State Laboratory (DOHSL) and the Medical Examiner's Office.

Mailing Address: Department of Health Laboratories

Forensic Science Laboratory

50 Orms St.

Providence, RI 02904

Telephone: 401-222-5600 (Main Laboratory)

222-5593 (FSL Chief - David Uliss, Ph.D)

222-1469 (Breath Alcohol Testing – Richard Minogue) 222-5534 (Forensic Biology/DNA – Robin Smith, M.S.)

222-5567 (Drug Chemistry – Paul Iwuc, M.S.) 222-5565 (Toxicology – Laurie Ogilvie, M.S.)

TTY 1-800-745-5555

Fax: 401-222-6985 (Main Laboratory)

222-5536 (Forensic Biology) 222-6064 (Drug Chemistry) 222-5566 (Toxicology)

FSL Website

Copies of this Manual and future updates, may be obtained from the Department of Health website at www.health.ri.gov.

FSL Services

The main functions of FSL are to:

- Identify, compare and interpret physical and biological evidence
- Provide expert forensic testimony
- Advise court officials on the presentation of scientific evidence
- Provide instructions concerning laboratory operations and scientific techniques to law enforcement training schools and the public
- Maintain custody of physical evidence until testing has been completed

FSL is divided into the following four laboratory units:

- 1. Forensic Biology/DNA/CODIS
- 2. Drug Chemistry
- 3. Breath Analysis
- 4. Toxicology/Blood Alcohol (DUI/DUID)

FSL Administration is responsible for Evidence Control, Information Systems, Database Management and Quality Assurance.

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Fees

Most laboratory examinations, court appearances and travel expenses are available to law enforcement agencies without charge. Requests for court appearances, training and public speaking should be made as far in advance as possible.

General Requirements for Evidence Submissions

Evidence is accepted at: 50 Orms Street, Providence, RI

Monday – Friday 8:30 AM -4:30 PM

3rd Floor - Rm #306

All evidence submissions should be connected to law enforcement or medical examiner case investigations. Evidence is not ordinarily analyzed for private individuals or corporations.

Several methods may be used to submit evidence to the laboratory. The method will depend on the type and size of the item, urgency and complexity of the case. The officer or individual submitting the evidence should take the proper precautions to prevent loss, damage and contamination of the evidence. Improperly packaged or labeled items may not be accepted for analysis. Please contact the laboratory with any questions related to evidence collection and/or submission. The laboratory can provide a list of recommended vendors of evidence collection/packaging supplies.

The following are general requirements for the submission of evidence. Please refer to individual services for specific evidence collection and submission requirements.

General

- All items of evidence submitted for testing should be identified with the case number, description of evidence and collection information.
- Tamper evident seals must be initialed or otherwise marked to document the person who sealed the evidence. Packaged evidence that is received with improper seals must be resealed at the time of submission before the item(s) will be accepted by the laboratory.
- Evidence should be maintained in a cool, dry location prior to submission to the laboratory. Any special storage requirements are described in the evidence collection guidelines for specific FSL services.
- Containers should be appropriately selected for each evidence type and adequately labeled, securely closed, and sealed. It may be necessary to place items in separate containers to prevent cross contamination.
- If warranted, place warning labels on the outer packaging of evidence (Biohazard, Hepatitis or HIV Positive, Chemicals, Glass, Sharp, etc.).
- Any wet plant material (such as marijuana plants, leaves, mushrooms, etc.) should be
 dried before packaging and transporting. Trapped moisture may cause the evidence to
 rot and be unsuitable for analytical testing.

Biohazards

In accordance with regulations established by the Occupational Safety and Health Administration (OSHA), all biohazard materials including blood specimens and other potentially infectious materials must be placed in leak-proof containers that will contain all contents and prevent leakage during handling, storage, and transport. The primary container must be placed in an outer shipping container with secondary leak-proof materials. The contents must be clearly labeled on the container.

Sharps and Syringes

Sharps are defined by OSHA as "any contaminated object that can penetrate the skin, including but not limited to, needles, scalpels, broken glass, broken capillary tubes and exposed ends of dental wires". Sharps must be submitted in puncture proof containers or syringe holders.

Case Documentation

Each time evidence is submitted to FSL, an "Evidence Examination Request and Receipt" form must be completed. These forms are available at the laboratory and can also be downloaded from www.health.ri.gov. The form includes the following information:

- Suspect Name
- Victim and Date of Birth
- Submitting Agency and County
- Agency Case Number
- Arresting Officer
- Date/Time of Occurrence
- Investigating Officer and Phone Number
- Juvenile or Federal Case Number (if applicable)
- Supplemental Submission Case Number
- Laboratory #/Date/Time
- Gross weight
- Item number
- Detailed description of each item of evidence
- request for service/analysis*

For DUI cases the following information is also required:

- Suspect Address
- Date of Birth
- Time of Apprehension
- Medical Person Collecting Sample and Place of Employment
- Time of Sample Draw(s)

^{*} It is important that all services required for a complete analysis are requested at the time of submission in order to prevent damage or loss of evidentiary value. For example, some services must be performed in a particular order (ex. fingerprint analysis before DNA)

The submitting officer or individual must print and sign his/her name on the bottom of the Evidence Examination Request and Receipt form. The FSL employee receiving the evidence will acknowledge the receipt of evidence <u>as purported to be</u> and sign the form. FSL will retain the original and provide a copy to the submitting agency.

All information requested on the Evidence Examination Request and Receipt form must be complete and legible.

Resolution of Evidence Receiving Discrepancies

Whenever possible, FSL will attempt to resolve evidence receiving issues at the time of submission. If evidence has already been accepted by the laboratory and a discrepancy is noted, the submitting agency will be notified. Documentation of the resolution will be included in the case record.

Chain of Custody

FSL uses barcode technology to maintain a secure chain of custody for all evidence from the time of submission until time of release, transfer or destruction.

Return of Evidence

In most cases, evidence will be temporarily stored in the laboratory system until all services have been performed. Law enforcement agencies will be contacted to retrieve evidence after testing has been completed.

Case Reports

Case Reports may be mailed through the U.S. Postal Service, faxed to the submitting law enforcement agency or picked up in person with proper identification. If transmitted by fax, a follow-up copy of the report will be mailed. Additional requests for information/records can be made via telephone, mail or facsimile.

Forensic Biology

The Forensic Biology (FB) Unit is comprised of Serology, DNA and CODIS sections. The main function of the FB Unit is to examine evidence obtained in sexual assault cases and other violent and non-violent crimes for the presence and identification of body fluids. When appropriately utilized, biological testing has the potential to supply information to:

- Link or eliminate a suspect with biological evidence
- Substantiate case circumstances
- Corroborate or refute an alibi
- Determine the sequence of events

Initially, items of physical evidence are examined for blood, semen or sources of DNA. Any trace evidence is collected and stored for future testing. Additional analyses performed are determined by the submitting agency's request, case circumstances, sample size and condition, available technology and/or conformance to FSL policies and procedures.

Services Currently Offered

Serology (routinely performed)	DNA Testing
seminal fluid ID	seminal fluid
presumptive urine ID	blood
presumptive saliva ID	saliva from envelopes, stamps, cigarette butts, cups, etc.
trace evidence collection (hairs, fibers, debris)	hairs (with roots)
blood ID	other – please contact the Forensic Biology Unit

^{*} FSL does not provide paternity testing at this time.

Testing Times

Serological testing times are highly dependent on the numbers and types of evidence submitted. Longer times are usually necessary when initial examinations are negative and more extensive tests are required. Examination of multiple items may also increase testing times significantly. DNA analysis has an established protocol that must be followed to ensure the test's success and integrity of the results; therefore, "rush requests" are generally not accepted.

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Serology

Blood Identification

Evidence suspected to contain blood will be examined to:

- Locate bloodstain(s)
- Confirm the presence of blood by chemical testing
- Perform DNA testing

Semen Identification

When evidence is submitted in a sexual assault case with an identified suspect, the evidence examination will include:

- Locating semen stains visually or with alternate light sources
- Acid phosphatase screening tests
- Microscopic examination for presence of spermatozoa
- Testing for other semen components in the absence of spermatozoa
- DNA typing when requested

If <u>no suspect</u> is identified, items submitted in a sexual assault kit will be examined for semen. If spermatozoa are present, DNA analysis will be performed and the male DNA fraction will be entered into the CODIS database for comparison.

Saliva Identification

When dried stains or questioned samples are submitted, evidence will be examined to:

- Locate stains visually or with alternate light sources
- Identify amalyse (a chemical component of saliva)
- Evaluate potential of evidence to provide adequate DNA
- DNA typing when requested

DNA

DNA technology is used for the individualization of biological evidence in forensic casework. DNA has the potential to identify or eliminate an individual as the source of biological evidence. To complete an inclusion or exclusion interpretation, a buccal (cheek swab) or blood sample is required from both the victim and suspect. Samples from other persons suspected of involvement may also be relevant. In sexual assault cases, a known sample from a consenting partner may be necessary if voluntary sexual activity has occurred within 72 hours.

DNA typing can be used as an investigative or trial tool to:

- Identify the donor of biological evidence
- Exclude a falsely accused suspect
- Associate serial rapes or other series of similar crimes
- Distinguish multiple assailants in rape cases
- Determine victim identity when other identification is not available

Currently the FB Unit is performing DNA analysis using Short Tandem Repeats (STRs). This method is based on the Polymerase Chain Reaction (PCR) that targets specific sequences at thirteen (13) locations on the DNA molecule.

Sexual Assaults

The FB Unit provides commercially prepared Sexual Assault Evidence Collection Kits (SAECKs) to local hospital emergency rooms in Rhode Island. These kits comply with the statewide medical examination protocols that have been developed for sexual assault victims. Currently, sexual assault testing is confidential, and victims do not have to file a police report in order for evidence to be collected.

CODIS

FSL participates in the Federal Bureau of Investigation's <u>COmbined DNA Index System</u> (CODIS). This local, state and national database allows for the comparison of DNA profiles from forensic casework samples to those of previous offenders. The FBI provides CODIS as a database of DNA profiles collected from convicted offenders. Also included in the database are "Forensic Unknowns", which are usually sperm DNA profiles from sexual assault cases and blood DNA profiles from homicide, burglary and assault cases. DNA profiles of unknown suspects can be searched against other unknown DNA profiles and/or convicted offender profiles to associate crimes or establish identities.

The FB Unit can enter DNA profiles from evidentiary items, suspects, and convicted offenders into Rhode Island's state index (SDIS) and compare these files to DNA profiles from past and present FSL cases. With the exception of suspect profiles, the information in SDIS is eligible for entry into the national DNA database (NDIS). These profiles will be compared to other forensic profiles as well as profiles from convicted offenders from other states contained within NDIS.

A complete administrative and technical review of sample data will be performed prior to entry into the CODIS database.

Victim, suspect and elimination DNA profiles are not uploaded into NDIS.

Evidence Collection Guidelines for Biological Evidence

Health and Safety Considerations

All biological evidence must be considered a potentially infectious biohazard. For this reason, adequate protective clothing should be worn, and proper evidence handling procedures should be followed. Disposable gloves should be worn when collecting and packaging evidence to protect against contact with potentially infectious pathogens. Gloves should be changed frequently to prevent cross-contamination of biological materials.

Physical Evidence Collection

To limit potential cross-contamination, collecting instruments should be thoroughly cleaned or replaced after each item of evidence is packaged. When collecting physical evidence, the entire object with questionable stains should be submitted whenever practical. If removal or transport of the entire object is not feasible, stained areas may be cut out or scraped. Small stains should be collected on sterile water-dampened cotton tipped applicators. It is essential that the applicator is air dried before packaging. Control samples should be collected from adjacent unstained areas.

The following are recommended guidelines only:

Evidence Collection on Large or Immovable Objects

Dry Stains:

- 1. Moisten sterile cotton tip swabs with distilled water
- 2. Rub swabs over stain until blood is picked up
- 3. Allow swabs to air dry
- 4. Package in clean paper, coin envelopes or similar
- 5. Seal so that tampering would be evident and place initials over seal
- 6. Clearly label outer package

Wet stains:

- 1. Soak up stain with sterile cotton tip swabs or clean cotton sheeting (preferably not gauze)
- 2. Allow to air dry
- 3. Package in clean paper, coin envelopes or similar
- 4. Seal so that tampering would be evident and place initials over seal
- 5. Clearly label outer package
- * Note: For large stains, use several swabs held closely together and coat each one evenly with stain. For smaller stains, use only one or two swabs and concentrate onto tip.

Evidence Collection – Small objects, clothing, bedding, etc.

- 1. If possible use a UV light or Alternate Light Source (ALS) to view possible seminal fluid stains
- 2. If item is relatively small, collect the entire item
- 3. For large items (such as a couch) cut out stained area along with an unstained area for a negative control
- 4. Allow items to air dry do not package wet items as this will increase degradation
- 5. Package in paper bags or paper wrapping and seal so that tampering would be evident
- 6. Place initials over seal and clearly label outer package

Known Standards for DNA Testing

Buccal

Instructional CDs have been provided to all Rhode Island law enforcement agencies regarding the proper collection technique for buccal samples. Please contact the laboratory with any questions or to request a copy of the CD.

Blood (only if buccal sample cannot be collected)

- 1. Collect one purple top tube of blood (approximately 5 ml) preserved with EDTA
- 2. Label the tube with the full name of the person whose blood was collected, the name or initials of the collector and date/time of collection.
- 3. Blood tubes should be placed in a secondary container and refrigerated after collection but must not be frozen. Samples should be delivered to the laboratory as early after collection as possible. Bloodstained clothing will only be sampled if adequate known blood samples cannot be collected.
- * Knowledge of a blood transfusion should be relayed to the FB Unit prior to the collection of a known blood sample. It may be necessary to wait 90 to 120 days before collecting the known blood.

Packaging of Biological Evidence

Evidence Type	Recommended Packaging
DNA and serological	paper, paper bags, envelopes, cardboard boxes
Blood scrapings and dried stains	enclosed in folded paper packets
Sexual assault evidence	Sexual Assault Evidence Collection Kit provided by FSL

- Plastic containers/bags and airtight containers <u>should not</u> be used to package biological evidence.
- Evidence packages should be maintained in cool, dry locations because heat, sunlight and moisture have destructive effects on biological evidence.
- Each item of evidence should be packaged separately whenever possible, particularly if items are from different sources (i.e. victim and suspect). Handling of evidence should be minimized.
- All evidence items must be thoroughly dried <u>without heat or sunlight</u> before packaging. Items with multiple wet stains should be laid flat to dry to prevent cross-contamination between stains. Drying methods should be chosen that minimize the potential for loss or contamination.

Toxicology

The Forensic Toxicology (FT) Unit examines biological and physical specimens for the presence of drugs and poisons. These analyses are most often performed on autopsy samples submitted by the RI Office of the State Medical Examiner. The FT Unit also analyzes specimens submitted by law enforcement agencies to test drug/alcohol levels of motor vehicle operators suspected of Driving Under the Influence (DUI). The FT Unit also tests unknown liquids and beverages for alcohol content.

Post-Mortem Toxicology

The purpose of performing post-mortem toxicological testing is to assist the Office of the State Medical Examiner in determining the cause and manner of death. Examples of cause of death include drowning, motor vehicle accident, asphyxia, electrocution, IV drug abuse, overdose, poisoning, aneurysm, gunshot wound, stabbing, seizure, and pulmonary embolism. Manner of death explains whether the death was an accident, homicide, suicide, or natural. In some cases the manner of death may be undetermined.

Drugs

To analyze post-mortem specimens, the FT Unit utilizes gas chromatography/mass spectrometry (GC/MS), high-performance liquid chromatography (HPLC), and liquid chromatography/mass spectrometry (LC/MS). Toxicological analyses are performed on two fluids, typically blood and urine, to identify and quantify substances present in the body at the time of death to determine if they may have caused or contributed to the death. A drugs-of-abuse screen includes tests for amphetamines, barbiturates, benzodiazepines, cannabinoids, cocaine, methadone, opiates, PCP, ethanol, tricylics, acetaminophen, and salicylates. All positive findings are quantified and confirmed by an alternate method.

Volatiles/Alcohol

The FT Unit also performs volatiles/alcohol testing using headspace gas chromatography. Headspace gas chromatography is used to identify and quantify levels of volatiles/alcohols present in blood or urine including acetone, methanol, ethanol, and isopropanol.

Specimens suspected to contain unusual or rarely encountered drugs or volatiles may be subcontracted to a reference laboratory for identification and quantification.

Poisons

Toxicological testing also includes testing for poisons. The most frequently found poison is carbon monoxide. Typical cases in which elevated levels of carbon monoxide are found include motor vehicle fatalities, fire deaths, suicides from automobile exhaust, and accidental deaths from improperly vented/operating engines or heating systems. Carbon monoxide levels in blood are measured by spectrophotometry.

Another poison of interest is cyanide, which is commonly used in the manufacturing of textiles and jewelry. Cyanide gas is also released as a result of incomplete combustion of a variety of materials. The FT Unit performs qualitative cyanide testing using a micro-diffusion color reaction. Cyanide confirmations, along with other rarely seen poisons such as strychnine and arsenic, are sent to the reference lab for quantification.

Unknown Liquid/Beverage Analysis

Analysis of unknown liquids and beverages is performed to determine alcohol content or proof. These samples may be submitted by the Medical Examiner or law enforcement agencies. Examples include suspicious liquids found in proximity to a decedent and beverages confiscated from establishments suspected of serving alcoholic beverages to minors.

Human Performance Testing

Human-performance toxicology is used to determine the presence or absence of ethanol and other drugs in blood to evaluate their role in modifying performance or behavior. Blood is the most suitable specimen for relating drug use to impairment. The FT Unit provides human performance testing services to state and local law enforcement agencies for individuals suspected of operating a motor vehicle while under the influence of ethanol (DUI) or drugs (DUID).

Blood samples are initially tested for the presence of volatiles/ethanol followed by an immunoassay screen for drugs of abuse. Should a positive result be obtained from the screening procedure, an appropriate confirmation procedure is performed to identify and quantify the analyte of interest. If the blood ethanol level is below 0.08% and the immunoassay panel negative, a general drug extraction method (liquid/liquid) is performed to identify any other drugs that may be present.

Substance Abuse Testing

Substance abuse testing determines the presence or absence of drugs and their metabolites in urine to demonstrate prior use or abuse. Because drugs can remain in the urine for several days after use, it is not a suitable specimen for DUI cases. The FT Unit performs urine drug testing for law enforcement agencies to substantiate the drug recognition expert's (DRE) opinion of impairment. The Unit also performs confirmatory drug testing for correctional facilities and preemployment screening for police departments.

Collection, Packaging and Submission of Toxicological Evidence

Toxicology samples should be collected and submitted to FSL as soon as possible after the offense or death.

- Blood tubes should be refrigerated, <u>not frozen</u>, until they are submitted to the laboratory. Do not expose specimens to high temperatures.
- Due to biological hazards, specimens should be packaged in well-sealed, leak-proof containers surrounded by absorbent materials.
- Post-mortem specimens should be collected prior to the embalming process.

	Sample Type	What to Submit
Post Mortem	Blood (heart and peripheral)	 2 gray top tubes (10 ml each) 2 red top tubes (1 serum separator) 1 lavender top tube
	Urine	3 red top tubes (10 ml each)
	Vitreous Humor	1 10 ml red top tube (at least 2 ml)
	Bile	1 10 ml red top tube (at least 2 ml)
	Gastric Contents	1 large plastic container sealed well
Kidney/Liver/Spleen		1 large plastic container sealed well (~ 10 g) unembalmed if possible
Lung Tissue		At least 1g in a sealed glass vial w/ crimp top
Law Enforcement*	Blood	2 10 ml gray stoppered tubes
	Urine	1 plastic jar containing 30 ml
	Liquids (volatiles analysis)	Plastic screw-top tubes, well sealed <u>or</u> original containers, at least 10 ml

^{*} Law enforcement personnel should refer to the RI DOH's Rules and Regulations available at www.rules.state.ri.us/rules/ regarding the collection and chemical testing of blood and urine samples.

Samples that are submitted by police departments for the purpose of blood alcohol determination and alcohol content will be destroyed after 6 months unless a request is made by the submitting agency to hold the samples.

Drug Chemistry

The Forensic Chemistry (FC) Unit is responsible for identifying controlled substances, performing drug assays and investigating product tampering and clandestine laboratories. Laboratory testing includes analysis of pills, powders, potions, drug residues, drug paraphernalia and botanicals for the presence of scheduled substances in violation of Federal or Rhode Island General Laws.

The FC Unit provides service to more than 50 law enforcement agencies including state, municipal, campus and airport police. In addition, the FC Unit also serves national and federal agencies such as the Drug Enforcement Agency (DEA), Federal Bureau of Investigation (FBI), US Secret Service, the Bureau of Alcohol, Tobacco and Firearms (ATF) and the US Marshall.

The FC Unit receives over 4000 cases every year and identifies more than 10,000 samples (most commonly cannabis, cocaine and heroin).

Submission of Evidence

Samples should be packaged and submitted to the laboratory according to the law enforcement agency's standard operating procedures for the transmittal of evidence. If necessary, the evidence can be repackaged or resealed with a polyethylene heat sealer located in the evidence receiving area of FSL. Refer to the general evidence submission guidelines on page 6 for packaging syringes.

In some instances, a representative sample of the submitted evidence will be analyzed. Multiple item analysis and net weights can be requested on the "Evidence Examination Request and Receipt" form.

Drug Analysis

The FC Unit conducts analytical testing on forensic samples using a combination of Gas Chromatography (GC) and Mass Spectrometry (MS).

The FC Unit can fulfill requests for cocaine base analysis for those cases referred to federal court. Juvenile cases are prioritized on request.

To identify cannabis (marijuana), the FC Unit uses the standard three test method involving microscopic examination, thin layer chromatography and a color test referred to as Duquenois (with a Levine modification).

The FC Unit can also assist in the investigation of clandestine drug manufacturing laboratories.

Breath Analysis

The Breath Analysis Unit of FSL maintains the State of Rhode Island's breath testing program. This program deals with the testing of breath alcohol content in suspected intoxicated and impaired motorists.

The main functions of the Breath Analysis Division are to:

- monitor breath testing instruments, both preliminary and evidentiary
- certify RI law enforcement officers as breath testing instrument operators
- train law enforcement officers in the areas of instrument operation, relevant laws and regulations and operational protocols

Subcontracting

It may be necessary for FSL to subcontract work due to unforeseen circumstances, case backlog, need for further expertise or on a continual basis. FSL will select competent forensic testing laboratories that are in compliance with ASCLD or ISO 17025 standards and meet the general purchasing/contract requirements of the State of Rhode Island. A submitting agency may request a different subcontract laboratory be utilized; however, FSL cannot be responsible for the subcontractor's work. If a submitting agency does not wish FSL to subcontract evidence, the agency should notify the laboratory in advance or indicate this on the "Evidence Examination Request and Receipt" form presented at the time the evidence is submitted. Results from testing performed by a subcontracted laboratory will be clearly identified as such.